

SCC eFile	2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	214518336					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: V W International, Inc.</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: ROBERT D VINCENT 6910 RICHMOND HWY SUITE 500 ALEXANDRIA, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAIRFAX COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: VA</p> </div> <div style="width: 35%;"> <p>DUE DATE: 3/31/2014</p> <p>SCC ID NO: 03554466</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	1,000,000	
CLASS	AUTHORIZED						
COMMON	1,000,000						
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 6910 RICHMOND HWY STE 500</p> <p style="text-align: center;">CITY/ST/ZIP: ALEXANDRIA, VA 22306</p>							
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>							
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: ROBERT D VINCENT TITLE: PRESIDENT ADDRESS: 4238 BRITTANY CT CITY/ST/ZIP/CO: WOODBRIDGE, VA 22192 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: ROBERT D VINCENT TITLE: PRESIDENT ADDRESS: 4238 BRITTANY CT CITY/ST/ZIP/CO: WOODBRIDGE, VA 22192	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: THOMAS J CORRIDON TITLE: TREAS/ SEC ADDRESS: 6910 RICHMOND HWY STE 500 CITY/ST/ZIP/CO: ALEXANDRIA, VA 22306 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: THOMAS J CORRIDON TITLE: TREAS/ SEC ADDRESS: 6910 RICHMOND HWY STE 500 CITY/ST/ZIP/CO: ALEXANDRIA, VA 22306	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: JAMES R VINCENT TITLE: CHAIRMAN ADDRESS: 9403 BROOKMAY COURT CITY/ST/ZIP/CO: ALEXANDRIA, VA 22309 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: JAMES R VINCENT TITLE: CHAIRMAN ADDRESS: 9403 BROOKMAY COURT CITY/ST/ZIP/CO: ALEXANDRIA, VA 22309	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: JAMES R VINCENT TITLE: CHAIRMAN ADDRESS: 9403 BROOKMAY COURT CITY/ST/ZIP/CO: ALEXANDRIA, VA 22309	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: JAMES M INGRAM TITLE: DIRECTOR ADDRESS: 110 CRISPIN ST CITY/ST/ZIP/CO: MERRITT ISLAND, FL 32952 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: JAMES M INGRAM TITLE: DIRECTOR ADDRESS: 110 CRISPIN ST CITY/ST/ZIP/CO: MERRITT ISLAND, FL 32952	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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NAME:	FRANK VINCENT	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	6910 RICHMOND HWY STE 500		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22306		
NAME:	R BRUCE DAGLEY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	6910 RICHMOND HWY STE 500		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22306		
NAME:	WARNER MOORE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	6910 RICHMOND HWY STE 500		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22306		
NAME:	PATRICIA AH SAULSBERY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	6910 RICHMOND HWY STE 500		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22306		
NAME:	JAMES SIMMONS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	6910 RICHMOND HWY STE 500		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22306		
NAME:	HOUSTON TOWNSEND	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	6910 RICHMOND HWY STE 500		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22306		
NAME:	RICHARD FORRESTER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	6910 RICHMOND HWY STE 500		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22306		
NAME:	EDWARD P PHILLIPS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	6910 RICHMOND HWY STE 500		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22306		
NAME:	GORDON A MURRAY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	6910 RICHMOND HWY STE 500		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22306		
NAME:	DONALD A KREIGER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	6910 RICHMOND HWY STE 500		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22306		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM T CROSS VICE PRESIDENT 6910 RICHMOND HWY STE 500 ALEXANDRIA, VA 22306	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	FLOYD HENDERSON VICE PRESIDENT 6910 RICHMOND HWY STE 500 ALEXANDRIA, VA 22306	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.					
/s/ THOMAS J CORRIDON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT		THOMAS J CORRIDON, TREAS/ SEC PRINTED NAME AND CORPORATE TITLE		4/7/2014 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.					